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2024 MAY 14 PM 1:43:39
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State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2024
Corporation

→ Filing period: February 1 - May 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by May 31.

1. Entity ID Number	2. Exact name of the Corporation			
000090480	TML Holdings, Inc.			
3. Principal Office Address		City	State	Zip
1 Custom House Street, Suite 4		Providence	RI	02903
4. NAICS Code	6. Brief description of the character of business conducted in Rhode Island			
531390	Real estate holdings and investments			
5. State of Incorporation				
Rhode Island				

7. List ALL officers (names and addresses) — Check the box to indicate an attachment

President Name			Vice-President Name		
Beth A. Tasca					
Street Address			Street Address		
1 Custom House Street, Suite 4					
City	State	Zip	City	State	Zip
Providence	RI	02903			
Secretary Name			Treasurer Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

8. List ALL directors (names and addresses) — Check the box to indicate an attachment

Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

9. Shares Authorized	10. Shares Issued — Check the box to indicate an attachment		
	NUMBER OF SHARES	CLASS/SERIES	PAR VALUE
This information is currently of record in the Department of State.	Authorized: 8,000	CWP	$1.0000
Changes require an additional filing.	Issued & outstanding: 0		

11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Name of Authorized Representative	Date
James P. Redding	5/13/2024
Signature of Authorized Representative	
/s/ James P. Redding	

FILED
MAY 14 2024
BY QC5K5

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 630- Revised 12/2023